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020908 7590 05/03/2006

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Theresa M. Rimbey (Depositor's name)
Theresa M. Rimbey (Signature)
July 25, 2006 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY/BOLOCY NO.	CONFIRMATION NO.
10/763,461	01/23/2004	Vitaly Shchukin	QIL-1CDV	6648

TITLE OF INVENTION: DEFECT-FREE SEMICONDUCTOR TEMPLATES FOR EPITAXIAL GROWTH

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	08/03/2006
EXAMINER		ART UNIT	CLASS-SUBCLASS		
MALDONADO, JULIO J		2823	148-033000		
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). <input checked="" type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. <input type="checkbox"/> "Fee Address" indication (or "Fee Address" indication form PTO/SB/17, Rev 03-02 or more recent) attached. Use of a Customer Number is required.					
2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.					
(A) NAME OF ASSIGNEE NL Nanosemiconductor GmbH					
(B) RESIDENCE (CITY and STATE OR COUNTRY) Dortmund, Germany					

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

Issue Fee
 Publication Fee (No small entity discount permitted)
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A check in the amount of the fee(s) is enclosed.
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 The Director is hereby authorized by change the required fee(s), or credit any overpayment, to Deposit Account Number 02-0710 (enclose an extra copy of this form).

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature Megan M

Date July 25, 2006

Typed or printed name Megan Van Leeuwen

Registration No. 45,612

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